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650 Town Center Drive, Suite 1800
Costa Mesa, California 92626
(714) 540-8700

Facsimile: (714) 540-9823

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TO: U.S. Patent & Trademark Office
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FROM: Frank L. Cire (Reg. No. 42,419)

RE: U.S. Application No. 09/942,569
Attn: Examiner R. Stevens
Group Art Unit 2176
Atty. Docket No: 01807.001743

FAX NO.: (571) 273-8300

DATE: February 8, 2006

NO. OF PAGES: 10
(including cover page)

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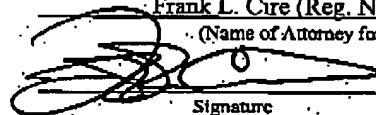
MESSAGE

Transmitted herewith is an Amendment and an Amendment Transmittal in response to the Office Action dated November 8, 2005.

I hereby certify that this correspondence is being facsimile transmitted to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on

February 8, 2006
(Date of Transmission)

Frank L. Cire (Reg. No. 42,419)
(Name of Attorney for Applicant)



Signature

February 8, 2006
Date of Signature

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In re Application of:

BERTRAND BERTHELOT, et al.

Application No.: 09/942,569

Filed: August 31, 2001

Docket No. 01807.001743.

Examiner: R. Stevens

Group Art Unit: 2176

Date: February 8, 2006

For: METHOD AND DEVICE FOR ADAPTING THE CONTENT OF DOCUMENTS ON AN INFORMATION SERVER

Mail Stop Amendment
COMMISSIONER FOR PATENTS
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

Transmitted herewith is an Amendment in the above-identified application.

☒ No additional fee is required.

The fee has been calculated as shown below

CLAIMS AS AMENDED						
	(2) CLAIMS REMAINING AFTER AMENDMENT		(4) HIGHEST NO. PREVIOUSLY PAID FOR	(5) PRESENT EXTRA	RATE	ADDITIONAL FEE
TOTAL CLAIMS	* 7	MINUS	** 36	= 0	x \$25 \$50	-0-
INDEP. CLAIMS	* 3	MINUS	*** 3	= 0	x \$100 \$200	-0-
Fee for Multiple Dependent claims \$180°/\$360						
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT---						-0-

* If the entry in Column 2 is less than the entry in Column 4, write "0" in Column 5.

** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, write "20" in this space.

*** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, write "3" in this space.

☐ Verified Statement claiming small entity status is enclosed, if not filed previously.

☐ A check in the amount of \$_____ is enclosed.

☐ Charge \$_____ to Deposit Account No. 06-1205. A duplicate copy of this sheet is enclosed.

- ☒ Any prior general authorization to charge an issue fee under 37 C.F.R. 1.18 to Deposit Account No. 06-1205 is hereby revoked. The Commissioner is hereby authorized to charge any additional fees under 37 C.F.R. 1.16 and 1.17 which may be required during the entire pendency of this application, or to credit any overpayment, to Deposit Account No. 06-1205. A duplicate copy of this paper is enclosed.
- ☐ A check in the amount of \$_____ to cover the fee for a _____ month extension is enclosed.
- ☐ A check in the amount of \$_____ to cover the Information Disclosure Statement fee is enclosed.
- ☒ Applicants' undersigned attorney may be reached in our Costa Mesa, California office by telephone at (714) 540-8700. All correspondence should continue to be directed to our address given below.

Respectfully submitted,



Frank L. Cire
Attorney for Applicants
Registration No.: 42,419

FITZPATRICK, CELLA, HARPER & SCINTO
30 Rockefeller Plaza
New York, New York 10112-3800
Facsimile: (212) 218-2200
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01807.001743.

PATENT APPLICATION

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of:)
BERTRAND BERTHELOT, et al.)
Application No.: 09/942,569)
Filed: August 31, 2001)
For: METHOD AND DEVICE FOR)
ADAPTING THE CONTENT OF)
DOCUMENTS ON AN)
INFORMATION SERVER)
Examiner: R. Stevens
Group Art Unit: 2176
February 8, 2006

Mail Stop Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

AMENDMENT

Sir:

In response to the Office Action dated November 8, 2005, please amend the
above-identified application as follows:

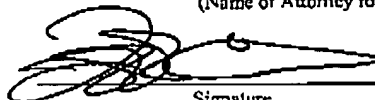
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(Name of Attorney for Applicant)



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February 8, 2006

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